Table 1
Reinsurance Quotes Received for the HFP County Buy-In Program

<b>Hospital Servi</b>	ces:						<b>J</b>			
Maximum Payab	le Per Memb	oer Per Year	\$1,000,000							
Deductible Options:	\$200,000	\$175,000	150,000	\$125,000	100,000	\$75,000	\$50,000			
Associated Premium Rates (Per Member Per Month):										
1. Ace American	\$1.00	\$1.21	\$1.61	\$2.27	\$3.38	\$5.24	No Quote			
2. OneBeacon	No Quote	No Quote	No Quote	\$0.64	\$0.79	\$0.92	\$1.15			
Physician Services: Maximum Payable Per Member Per Year \$250,000										
Deductible Options:	\$25,000	\$20,000	\$15,000	\$10,000						
Associated Prem	ium Rates (Pe	er Member Per	Month):							
1. Ace										
American	\$0.19	\$0.25	\$0.44	\$1.00						
2. OneBeacon	\$0.20	\$0.26	\$0.30	\$0.38						

- 1. Insurance Carrier: Ace American/Presidio Excess Insurance Services, Inc.
- 2. Insurance Carrier: OneBeacon America Insurance Company
- 3. Assumptions: 20,000 County Buy-In enrollees
- 4. Reimbursement Percent = 90%

Table 2
Impact of the Reinsurance Costs to the HFP County Buy – In Program

Insurance Carrie	r: Ace An	nerican/P	Presidio E	xcess Insi	urance S	Services, l	lnc.				
Hospital Services:											
Deductible Options:	\$200,000	\$175,000	\$150,000	\$125,000	100,000	\$75,000	\$50,000				
Associated Premium Rates (Per Member Per Month):	\$1.00	\$1.21	\$1.61	\$2.27	\$3.38	\$5.24	No Quote				
Physician Services:											
Deductible Options:	\$25,000	\$20,000	\$15,000	\$10,000							
Associated Premium Rates (Per Member Per Month):	\$0.19	\$0.25	\$0.44	\$1.00							
Ace American- \$1.19 - 6.24 Per Member Per Month											
Acc American											
Insurance Carrie	<u> </u>										
	<u> </u>										
Insurance Carrie	<u> </u>					\$75,000	\$50,000				
Insurance Carrie Hospital Services:	r: OneBe	acon Am	erica Insu	rance Co	mpany	\$75,000 \$0.92	\$50,000 \$1.15				
Insurance Carrie Hospital Services: Deductible Options: Associated Premium Rates (Per Member Per	**************************************	<b>\$175,000</b>	<b>erica Insu</b> \$150,000	\$125,000	<b>mpany</b> 100,000	,	, ,				
Insurance Carrie Hospital Services: Deductible Options: Associated Premium Rates (Per Member Per Month):	**************************************	<b>\$175,000</b>	<b>erica Insu</b> \$150,000	\$125,000	<b>mpany</b> 100,000	,	, ,				
Insurance Carrie Hospital Services: Deductible Options: Associated Premium Rates (Per Member Per Month): Physician Services:	**************************************	\$175,000 No Quote	\$150,000 No Quote	\$125,000 \$0.64	<b>mpany</b> 100,000	,	, ,				